1503-133-1364

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2015 JUN -9 AM 10: 21

			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
M i l l e n n i a l s	ij Rijisijng P	_J A _J C _[]	
ADDRESS (number and street)	1 4 1 5 S W 2	9 6 S t r e e t	
(Check if address is changed)			
•	F e d e r a l W	[8 Y	W A 9 8 0 2 3 -
COMMITTEE'S E-MAIL ADDRES	SS		
(Check if address is changed)	s u p p o r t @ m	li li la lu lu li la li la T	r ji js ji jn jg jp ja jc j. jc jo jm j j
	Optional Second E-Mail Ade	dress	
COMMITTEE'S WEB PAGE ADD	DRESS (URL)		•
(Check if address is changed)	w w w j. m ji li ji je	ınını i jallısırı i isi	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. DATE 0,6 ,0	8 2 0 1 5		
3. FEC IDENTIFICATION NU	JMBER ▶ C 0	0 5 7 1 9 5 0	·
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer	C.W. Lucas Agnew		
Signature of Treasurer	W. Julss	Agnew	Date 0 6 0 8 4 2 0 1 5
NOTE: Submission of false, errone		may subject the person signing the FION SHOULD BE REPORTED W	his Statement to the penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ECL. EL/BINI I

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5.	_		OMMITTEE Committee:
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	Name of Candid	-	
	Candid Party A		Office State President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name (Candid		
	Party	Com	nmittee:
	(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.
	Politic	cal A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
			Corporation Corporation w/o Capital Stock Labor Organization
			Membership Organization Trade Association Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
			In addition, this committee is a Lobbyist/Registrant PAC.
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
	Joint !	Fund	raising Representative:
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
		Comi	mittees Participating in Joint Fundraiser
		1.	
	÷	2.	FEC ID number
		3.	FEC ID number

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Write or Type Committee Name		
6. Name of Any Connected (Prganization, Affiliated Committee, Joint Fundralsing Representative, or Leadershi	p PAC Sponsor
Mailing Address		
		<u>, </u>
	CITY STATE Z	IP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponso
 Custodian of Records: Idea books and records. 	tify by name, address (phone number optional) and position of the person in posse	ession of committee
Full Name	<u></u>	1 1 1 1 1 1
Mailing Address		11111
	<u> </u>	
Title or Position	CITY STATE Z	IP CODE
	Telephone number	
B. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	e and address of
Full Name of Treasurer	 - - - - - - - - - - - - - - - - - - -	
Mailing Address		
		1 1 1 1
Title or Position	CITY STATE ZI	P CODE
<u> </u>	Telephone number	<u> </u>

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		phone number	
	or maintains funds		
safety deposit boxes Name of Bank, Depo			
			1 1 1 4 4 1 1 4
Name of Bank, Depo			
Name of Bank, Depo			
Name of Bank, Depo		STATE	ZIP CODE
Name of Bank, Depo	CITY	STATE	ZIP CODE
Name of Bank, Depo	CITY	STATE	ZIP CODE
Name of Bank, Depo	CITY	STATE	ZIP CODE
Name of Bank, Depo	CITY		ZIP CODE
Name of Bank, Depo	CITY		ZIP CODE

SHIP DATE: 08JUN15 ACTWGT: 0.1 LB CAD: 6982959/SSF01601 BILL CREDIT CARD TO FEDERAL ELECTION COMMISION WASHINGTON DC 20463 DRIGIN ID:ZRZA (000) 000-0000 LUCAS AGNEW HILERNIALS RISING PAC 3641 WINFIELD LN NW MASHINGTON, DC 20007 UNITED STATES US **999 E ST NW** FedEx carbon-neutral envelope shipping

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED